

April 4th, 2008

Robert E Gerkin J-79986
Folsom State Prison 5B/2BA34
Post Office Box 715071
Represa, California 95671

FSP-MAILROOM

Dear Sir:

Enclosed, signed Inmate Trust Withdrawal, for copy Inmate CDC-119 Legal Mail-Log, for the months of March and April of 2008

Thank you inadvance

Dated: 4/4th/2008

ROBERT E GERKIN

Robert E Gerkin

APR 07 RECD Valerie

attached is a copy of your CDC 119 outgoing legal mail log
for 2008 you were charged 10¢ for copy.

119 OUT GOING LEGAL MAIL
FOLSOM STATE PRISON

YEAR 2008

CDC #	I/M NAME	SPECIAL PURPOSE LETTER(S)	DATE
J79986	GERKIN S	NON-LEGAL: EDITOR IN CHIEF, CRIMINAL PROCEDURE PROJECET, GEORGETOWN LAW JOURNAL	1/2/2008
	TRUST W/ORDER	CA VICTIM COMPENSATION & GOV'T CLAIMS BD, POB 3035, SACRAMENTO CA 95812-3035	1/8/2008
	TRUST W/ORDER	SUPERIOR COURT, CIVIL DIV, 720 NINTH ST, RM 102, SACRAMENTO CA 95814	2/1/2008
	S	PRISON LAW OFFICE, GENERAL DELIVERY, SAN QUENTIN CA 94964-0001	2/4/2008
	S	US DISTRICT COURT, 501 I ST, STE 4-401, SACRAMENTO CA 95814	2/5/2008
	TRUST W/ORDER	US DISTRICT COURT, NORTHERN DISTRICT OF CA, 450 GOLDEN GATE AVE, SAN FRANCISCO CA 94	3/21/2008
1 OF 2	TRUST W/ORDER	ATTORNEY GENERAL'S OFFICE, POB 944255, SACRAMENTO CA 94244-2550	3/28/2008
2 OF 2	TRUST W/ORDER	SUPERIOR COURT, LEGAL PROCESS DESK, 720 NINTH ST, RM 102, SACRAMENTO CA 95814-1380	3/28/2008
	TRUST W/ORDER	ATTORNEY GENERAL'S OFFICE, 455 GOLDEN GATE AVE, STE 11000, SAN FRANCISCO CA 94102	4/3/2008

DISTRIBUTION:
WHITE - CENTRAL FILE
BLUE - INMATE (2ND COPY)
GREEN - ASU

CANARY - WARDEN
PINK - HEALTH CARE MGR
GOLDENROD - INMATE (1ST COPY)

INMATE'S NAME GERKIN		CDC NUMBER 179986
REASON(S) FOR PLACEMENT (PART A)		

- ☒ PRESENTS AN IMMEDIATE THREAT TO THE SAFETY OF SELF OR OTHERS
☐ JEOPARDIZES INTEGRITY OF AN INVESTIGATION OF ALLEGED SERIOUS MISCONDUCT OR CRIMINAL ACTIVITY
☒ ENDANGERS INSTITUTION SECURITY ☐ UPON RELEASE FROM SEGREGATION, NO BED AVAILABLE IN GENERAL POPULATION

DESCRIPTION OF CIRCUMSTANCES WHICH SUPPORT THE REASON(S) FOR PLACEMENT:

On Saturday, April 5, 2008, you are being placed into Administrative Segregation (Ad-Seg) based on the following: You have been identified via confidential information as a Potential Victim of Assault if you were to remain in the general population at FSP. You will remain in Ad-Seg pending an investigation to be conducted by Correctional Sergeant J. Codorniz. Due to the aforementioned, you are deemed a threat to the safety and security of the institution. You will appear before the Institutional Classification Committee within 10 days for a review of your housing, custody and program needs.

<input type="checkbox"/> CONTINUED ON ATTACHED PAGE (CHECK IF ADDITIONAL)		<input type="checkbox"/> IF CONFIDENTIAL INFORMATION USED, DATE OF DISCLOSURE: / /	
DATE OF ASU PLACEMENT 04/05/08	SEGREGATION AUTHORITY'S PRINTED NAME R. Janzen	SIGNATURE <i>[Signature]</i>	TITLE Lieutenant
DATE NOTICE SERVED 4/5/08	TIME SERVED 1230	PRINTED NAME OF STAFF SERVING ASU PLACEMENT NOTICE J. CODORNIZ SGT.	STAFF'S TITLE SGT.
<input checked="" type="checkbox"/> INMATE REFUSED TO SIGN		INMATE SIGNATURE	CDC NUMBER 179986

ADMINISTRATIVE REVIEW (PART B)
The following to be completed during the initial administrative review by Captain or higher by the first working day following placement

STAFF ASSISTANT (SA)		INVESTIGATIVE EMPLOYEE (IE)	
STAFF ASSISTANT NAME	TITLE	INVESTIGATIVE EMPLOYEE'S NAME	TITLE
IS THIS INMATE:		EVIDENCE COLLECTION BY IE UNNECESSARY	
LITERATE?	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	
FLUENT IN ENGLISH?	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	
ABLE TO COMPREHEND ISSUES?	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	
FREE OF MENTAL HEALTH SERVICES DELIVERY SYSTEM NEEDS?	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	
DECLINING FIRST STAFF ASSISTANT ASSIGNED?	<input type="checkbox"/> YES <input type="checkbox"/> NO	DECLINED 1ST INVESTIGATIVE EMPLOYEE ASSIGNED	
<input type="checkbox"/> NOT ASSIGNED		<input type="checkbox"/> NOT ASSIGNED	

Any "NO" requires SA assignment

Any "NO" may require IE assignment

INMATE WAIVERS

<input type="checkbox"/> INMATE WAIVES OR DECLINES INTERVIEW WITH ADMINISTRATIVE REVIEWER	<input type="checkbox"/> INMATE WAIVES RIGHT TO 72 HOURS PREPARATION TIME
<input type="checkbox"/> NO WITNESSES REQUESTED BY INMATE	INMATE SIGNATURE
	DATE

WITNESSES REQUESTED FOR HEARING

WITNESS NAME	TITLE/CDC NUMBER	WITNESS NAME	TITLE/CDC NUMBER
WITNESS NAME	TITLE/CDC NUMBER	WITNESS NAME	TITLE/CDC NUMBER

DECISION: ☐ RELEASE TO UNIT/FACILITY ☐ RETAIN PENDING ICC REVIEW ☐ DOUBLE CELL ☐ SINGLE CELL PENDING ICC

REASON FOR DECISION:

ADMINISTRATIVE REVIEWER'S PRINTED NAME	TITLE	DATE OF REVIEW	TIME	ADMINISTRATIVE REVIEWER'S SIGNATURE
CORRECTIONAL ADMINISTRATOR'S PRINTED NAME (if necessary)		CORRECTIONAL ADMINISTRATOR'S CO-SIGNATURE (if necessary)		DATE OF REVIEW

See chronological Classification Review document (CDC 128 - G) for specific hearing information

ROBERT E GERKIN J-79986
Folsom STATE PRISON 4B/A1-14
POST OFFICE Box 950
Folsom, California 95763



ATTN: CLERKS OFFICE
UNITED STATES DISTRICT
COURT, NORTHERN DISTRICT
450 Golden Gate Ave
San Francisco, CA 94102

CONFIDENTIAL
Robert E Gerkin

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